### F7R-R Instructions

EZB-R Instructions			
Part I	<b>General Information</b>		
Line 1: Line 2: Line 3: Line 4: Line 5: Line 6: Line 7:		of the business fax number (including area code) location in the enterprise zone or inventory location or the federal identification number of the business	
Line 8:	List the total number of employees number on line 8  Example for line 8:  Date  January 15  February 15  March 15  April 15  May 15  June 15  July 15  August 15  September 15  October 15  November 15  December 15  Year Total  395 ÷ 12 = 32.9	Employees  30 30 30 30 30 30 45 45 45 45 25 25 30 30 30 30 30 45 Enter 32.9 on line 8	
Line 9:	List the total number of zone resid	ents employed at the zone location on the 15th day of each month, divide the resulting figure by (see example in line 8 instructions). Every participating business must complete this line,	
Line 10:		laries paid at the zone location for the calendar year for which you are filing	
Line 11:		paid to zone resident employees at the zone location for the calendar year for which you are filing	
Line 12:		e Zone Qualified Employee Certificates (IT-40QEC) issued for the calendar year for which you	
Line 42.	•	are at a day the read legation during the calendary year for which you are filing	
Line 13: Line 14:		created at the zone location during the calendar year for which you are filing filled by zone residents during the calendar year for which you are filing	
Part II Ta	x Savings Summary		

## If you are a new business or have no tax savings to report for the calendar year for which this form applies, please skip to Part III of this form.

Line 15:	Enter the total inventory tax savings (2001 assessment payable 2002) at the zone location, from the EZ-1 form	
Line 16:	Enter the total gross income tax savings (not the exempted amount) claimed for the calendar year for which you are filing	
Line 17:	Enter the employment expense credit amount from Schedule EZ	
Line 18:	Enter the loan interest credit amount from Schedule LIC	
Line 19:	Add the amounts in Lines 15-18 and enter amount	

Part III	Registration Fee and Eligibility
Line 20:	If the total on line 19, Part II exceeds \$1,000, multiply the amount by .01 and enter that amount on this line. If a zone business
	receives tax-saving incentives in excess of \$1,000 in any year, the business MUST pay an annual registration fee of one (1) percent
	of its tax savings to the STATE ENTERPRISE ZONE BOARD, or be denied credits and incentives and disqualified from further participation according to IC 4-4-6.1-2.5. <b>REMIT THE AMOUNT ON THIS LINE WITH THE ORIGINAL EZB-R TO</b> : State Enterprise
	Zone Board, One North Capitol, Suite 600, Indianapolis, IN 46204-2288. You must still submit an EZB-R even if your business does not owe a registration fee!
Line 21:	Multiply the amount on line 19, Part II of this form by the local UEA rate and enter that amount on this line (please contact the local UEA to determine the rate). REMIT THE AMOUNT ON THIS LINE TO THE LOCAL UEA WITH A COPY OF THIS EZB-R
Line 22:	New Capital Investment for the Calendar Year
	<ul> <li>A. Enter the total dollar amount spent in the calendar year for zone business renovation and improvements at the zone location</li> <li>B. Enter the total dollar amount spent in the calendar year for new equipment at the zone location</li> </ul>
	C. Enter the total increase in inventory from previous year for reinvestment in inventory – attach a copy of the Inventory Valuation for Incentive Reinvestment Worksheet
Line 23:	Enter the amount of zone resident employee wages for the calendar year that exceeds each taxpayer's base period qualified wages <b>AND/OR</b> the total dollar amount spent on employee training
Line 24:	Add lines 20, 21, 22A, 22B, 22C, and 23 and enter that amount on this line

# Signature Lines

Corporate/firm officer must sign this form and print name below written signature. Failure to sign and print name and title may delay processing and may result in your form being returned to you. If someone other than the corporate/firm officer prepared this form, their name, signature, address and phone number are required.